

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: September 14, 2004

Signature: Valerie J. Sarosky

(Valerie J. Sarosky)

1624  
L  
Qfw  
Docket No.: ASZD-P01-599  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Mortlock et al.

Application No.: 10/088814

Art Unit: 1624

Filed: September 4, 2002

Examiner: T. N. Truong

For: QUINAZOLINE DERIVATIVES AND THEIR  
USE AS PHARMACEUTICALS

**AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION**

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

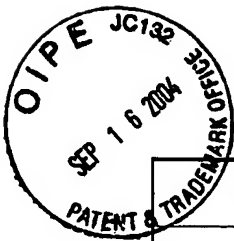
**INTRODUCTORY COMMENTS**

In response to the Office Action dated April 14, 2004, please amend the above-identified U.S. patent application as follows:

**Amendments to the Specification** begin on page 2 of this paper.

**Amendments to the Claims** are reflected in the listing of claims which begins on page 13 of this paper.

**Remarks/Arguments** begin on page 37 of this paper.



<b>AMENDMENT TRANSMITTAL LETTER</b>				Docket No. ASZD-P01-599	
Application No. 10/088814	Filing Date September 4, 2002	Examiner T. N. Truong	Art Unit 1624		
Applicant(s): Mortlock et al.					
Invention: QUINAZOLINE DERIVATIVES AND THEIR USE AS PHARMACEUTICALS					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
<b>Total Claims</b>	30	- 31 =		x	0.00
<b>Independent Claims</b>	3	- 3 =		x	0.00
<b>Multiple Dependent Claims (check if applicable)</b> <input type="checkbox"/>					
<b>Other fee (please specify):</b> Extension for response within second month					420.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					420.00
<input checked="" type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input type="checkbox"/> Small Entity</span>					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>18-1945</u> in the amount of \$ <u>420.00</u> . A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>18-1945</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 _____ David P. Halstead Attorney Reg. No.: 44,735  ROPES & GRAY LLP One International Place Boston, Massachusetts 02110-2624 (617) 951-7449				Dated: <u>September 14, 2004</u>	
I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.					
Dated: <u>9/14/04</u> Signature:  (Valerie J. Sarosky)					